FEC

STATEMENT OF

FORM 1	ORGANIZATION	
1 Olliw 1	(See instructions)	Office use only
NAME OF COMMITTEE (in f	(Check if name Example: If typying, type is changed) over the lines	12FE4M5
Republican Pa	rty of Florida	
ADDRESS (number and s	420 E. Jefferson Street	
(Check if address		
is changed)	Tallahassee	FL 32301 -
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	rswarttz@rpof.org	
COMMITTEE'S WEB I	PAGE ADDRESS (URL)	
(Check if address	www.rpof.org	
is changed)		
2. DATE 0.1	28 2011	1
3. FEC IDENTIFICAT	TION NUMBER C C00099259	
4. IS THIS STATEM	ENT NEW (N) OR X AMENDED (A)	
L certify that I have examin	ned this Statement and to the best of my knowledge and belief it is true, correct an	d complete
rootally that make oxami		
Type or Print Name of	Treasurer Jeff Howell	
Signature of Treasurer	Electronically Filed by Jeff Howell	Date 01 / 28 / Y Y Y Y
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED N	
Office Use Only	For further information of Federal Election Commiss Toll Free 800-424-9530	contact: FEC FORM 1

	FEC	Form 1 (Revised 02/2009)	Page 2
5.		COMMITTEE (Check One) Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete th information below.)	e candidate
	Name of Candidate		
	Candidate Party Affilia	Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		
	Party Com		
	(d) X		(Democratic, Republican,etc.) Party.
	Political A	ction Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	l organization is a:
		Corporation Corporation w/o Capital Stock Lab	or Organization
		Membership Organization Trade Association Co.	operative
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Latera Procedu		
		raising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	candidate.
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Cor	mmittees Participating in Joint Fundraiser	
		1. FEC ID number	
		2. FEC ID number	
		3. FEC ID number	
		FEC ID number C	

Write or Type Committee Name Republican Party of F			
	lorida		
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising I	Representative, or Leadersh	nip PAC Sponsor
Target State Victory Fu	<u>und</u>		
Mailing Address	228 S. Washington Street		<u> </u>
	Suite 115		
		L YA	22314 _ [
	CITY	STATE A	ZIP CODE
Relationship:			
Connected Organization	on Affiliated Committee X Joint Fundrai	sing Representative	eadership PAC Sponsor
Mailing Address	420 E. Jefferson Street		
	Tallahassee	FL	00004
			32301
Title or Position ▼ CFO	CITY A Telepi	STATE Anone number 850 -	ZIP CODE 1/2 222 - 7920
8. Treasurer: List the name name and address of a		none number <u>850</u> –	ZIP CODE A 222 – 7920
3. Treasurer: List the name name and address of a	Telepo ne and address (phone number optional) of the t	none number <u>850</u> –	ZIP CODE A 222 – 7920
3. Treasurer: List the name name and address of a Full Name	ne and address (phone number optional) of the tany designated agent (e.g., assistant treasurer).	none number <u>850</u> –	ZIP CODE 1 222 – 7920
3. Treasurer: List the name name and address of a Full Name of Treasurer	ne and address (phone number optional) of the tany designated agent (e.g., assistant treasurer). Howell	none number <u>850</u> –	ZIP CODE A 222 – 7920
8. Treasurer: List the name name and address of a Full Name of Treasurer State of Treasurer State of Treasu	Telepine and address (phone number optional) of the truny designated agent (e.g., assistant treasurer). Howell 420 E. Jefferson Street	reasurer of the committee	ZIP CODE 1 7920

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Full Name of Designated Agent	Blaise Ingoglia		
Mailing Address	420 E. Jefferson Street		
	Tallahassee	FL	32301 –
Title or Position ▼	CITY A	STATE A	ZIP CODE A
Ass	istant Treasurer To	elephone number	
		a a constitue a describe formale de la	lds accounts, rents
Banks or Other Dep safety deposit boxes	positories: List all banks or other depositories in which the or maintains funds.	e committee deposits funds, no	,
Banks or Other Dep safety deposit boxes Name of Bank, Depos	or maintains funds.	e committee deposits funds, no	,
safety deposit boxes	or maintains funds.	e committee deposits funds, no	
safety deposit boxes	or maintains funds. sitory, etc.	e committee deposits funds, no	
safety deposit boxes of Name of Bank, Depos	or maintains funds. sitory, etc. SunTrust Bank	e committee deposits funds, no	
safety deposit boxes of Name of Bank, Depos	or maintains funds. sitory, etc. SunTrust Bank	e committee deposits funds, no	32301
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safety deposit boxes of Name of Bank, Deposition Mailing Address	or maintains funds. sitory, etc. SunTrust Bank 215 S. Monroe Street Tallahassee CITY △		32301 _
safety deposit boxes of Name of Bank, Deposition Mailing Address	or maintains funds. sitory, etc. SunTrust Bank 215 S. Monroe Street Tallahassee CITY △	FL STATE 4	32301 ZIP CODE
safety deposit boxes of Name of Bank, Deposition Mailing Address Name of Bank, Deposition Name	SunTrust Bank 215 S. Monroe Street Tallahassee CITY Δ sitory, etc.	FL STATE 4	32301 ZIP CODE
safety deposit boxes of Name of Bank, Deposition Mailing Address Name of Bank, Deposition Name	SunTrust Bank 215 S. Monroe Street Tallahassee CITY Δ sitory, etc.	FL STATE 4	32301 ZIP CODE

		[ADDITIONAL]
300 S. Washington Street		
Alexandria	VA	22314
CITY 🛕	STATE ⊿	ZIP CODE 🛕
ganization, Affiliated Committee, Joint Fundraising Repres	sentative, or Leader	[ADDITIONAL rship PAC Sponsor
tee		
P.O. Box 365		
McLean	LVA L	22101
CITY▲	STATE A	ZIP CODE
Affiliated Committee X Joint Fundraising Repres	sentative Lea	dership PAC Sponsor
		[ADDITIONAL]
CITY A	STATE ▲	ZIP CODE A
Telephone	e number	
		[ADDITIONAL]
	Alexandria CITY ganization, Affiliated Committee, Joint Fundraising Representee P.O. Box 365 CITY Affiliated Committee X Joint Fundraising Represented September 1985 CITY CITY Telephone	Alexandria CITY STATE ganization, Affiliated Committee, Joint Fundraising Representative, or Leader tee P.O. Box 365 McLean CITY STATE Affiliated Committee X Joint Fundraising Representative Lea CITY STATE Telephone number

Banks or Other Depositories: safety deposit boxes or maintains	List all banks or other depositories in which the comr	nittee deposits funds, hol	ds accounts, rents
Name of Bank, Depository, etc.	, 101.00.		[ADDITIONAL]
BB&T			
Mailing Address	1909 K St., NW		
l			
Į	Washington	DC	20006
	CITY 🗖	STATE₄	ZIP CODE 🛕
Name of Any Connected Orga	nization, Affiliated Committee, Joint Fundraising Re	enresentative or Leade	[ADDITIONAL
Rubio Victory Committee		presentative, or Leade	Simp i Ao oponisoi
	. coo c. Washington Chart		
Mailing Address	228 S. Washington Street		
	Suite 115		
	Alexandria	L LYA L	22314
elationship:	СІТУ▲	STATE A	ZIP CODE
Connected Organization	Affiliated Committee X Joint Fundraising R	epresentative Lea	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name		1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1
Mailing Address			
Mailing Address			
Title or Position ▼	CITY A	STATE. <u>A</u>	ZIP CODE A
	Telep	hone number	
Joint Fundraiser Participant			[ADDITIONAL]
	1 -	EC ID number C	-
		EC ID number	